SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, and 4a & b. Print your name and address on the reverse of this form so that return this card to you. Attach this form to the front of the mailpiece, or on the back if does not permit. Write "Return Receipt Requested" on the mailpiece below the artic. The Return Receipt Fee will provide you the signature of the persot and the date of delivery.	1. Addressee's Address cle number. on delivered Consult postmaster for fee.
3. Article Addressed to:	4a. Article Number 7000 0520 0025 3711 3411 ÷
Attn: David Pang Pang & Son Distribution, LLC 1414 Alexander Street, Apt. #201	4b. Service Type Registered Insured COD Express Mail Return Receipt for Merchandise
Honolulu, HI 96822	7. Date of Delivery
5. Signature (Addressee) SOU JEN JUNG 6. Signature (Agent) SM JM	8. Addressee's Address (Only if requested and fee is paid)
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